## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT CORPORATION ANNUAL REPORT** 





FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P97000006883 (7)

HEX INVESTMENTS, INC.

## **FILED** May 05 1998 8:00am Secretary of State



Principal Place of Business Mailing Address								) tagatagar isa absil bagat galais gaati galai gasil galab asial lalas lalas lalas siste siste af bi
10691 N. KENDALL DRIVE 10691 N. KENDALL DRIVE   SUITE 310 SUITE 310   MIAMI FL 33176 MIAMI FL 33176				VE			_	DO NOT WRITE IN THIS SPACE
								3. Date Incorporated or Qualified 01/23/1997
2. Principal P	lace of Business	2a.	Mailing Address					4. FEI Number Applied For
21		26	,,,ag ,,aa					4.5-07 Z1Z43 Not Applicable
Suite, Apt.	#, <b>9</b> tc.	20	Suite, Apt. #, etc.			,		40 7E
22			27					5. Certificate of Status Desired Fee Regulred
City & State			City & State					6. Election Campaign Financing \$5.00 May Be
23			28					Trust Fund Contribution Added to Fees
Zip	Country	L.,	Zip Country			<b>y</b>		8. This corporation owes or has paid the current year Intangible
24	25 29			30	30			Personal Property Tax due June 30. 🔲 Yes 🛂 No
	9. Name and Address of Currer	nt Regis	tered Agent		81	Mana		10. Name and Address of New Registered Agent
	ACHADO, JOSE LUIS				"	Name	е	
10691 N. KENDALL DRIVE					82	Stree	et Address (P.O. Box Number is Not Acceptable)	
	ITE 310				83	ļ	<del></del>	
IMIL IMIL	AMI FL 33176				100			
					84	City		FL 85 Zip Code
11. Pursuant to the provisions of Sections 607,0502 and 607,1508, Florida Statutes, the					abov	e-name	d corpora	ration submits this statement for the purpose of changing its registered
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.								
SIGNATURE								
Signature, typed or printed name of registered agent and title if applicable (NOTE: F					egistored Agent signature require		re required (	
12.	OFFICERS AN	D DIREC	DELETE	13.				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PD Herran, emiliano e		L DELETE		IITLE			Change Addition
NAME	10691 N. KENDALL DRIVE, 4	10 1A			NAME			
STREET ADDRESS	MIAMI FL 33176	1310				I ADDRESS	·	
CITY-ST-ZIP TITLE	SD SD		DELETÉ	_	IITLE	ST-ZIP	<del> </del>	Change Addition
NAME	CAINZOS, ROGELIO				IAME		]	briango Audition
STREET ADDRESS	10691 N. KENDALL DRIVE, #	¥310				r address	,	
CITY-ST-ZIP	MIAMI FL 33176					ST-ZIP	`	
TITLE	VD		DELETE	3.11		O. E.	<del>                                     </del>	Change Addition
NAME	CORREA, JORGE			3.21	IAME			•
STREET ADDRESS	10691 N. KENDALL DRIVE, #	F310		335	STREET	address	:	
CITY-ST-ZIP	MIAMI FL 33176			3.4.	CITY-	ST-ZIP		
TITLE	TD		DELETE	4.1 1	ITLE			Change Addition
NAME	MACHADO, JOSE			4. 2	NAME			
STREET ADDRESS	10691 N. KENDALL DRIVE, #	F310		4.3 9	TREET	ADDRESS	3	
CITY-ST-ZIP	MIAMI FL 33176			4.4 (	ITY-S	T-ZIP		
TITLE	D		☐ DELETE	5.13	ITLE			Change Addition
NAME	LASARTE, FELIX			5.21	IAME			
STREET ADDRESS	10691 N. KENDALL DRIVE, #	F310		5.3.5	TREET	ADDRESS	;	
CITY-ST-ZIP	MIAMI FL 33176			_		ST-ZIP		
TITLE	D DATE TO A LOW T		☐ DELE <b>TE</b>	6.1 T				☐ Change ☐ Addition
NAME	GOMEZ, DAISY T	****			IAME		-	
STREET ADDRESS	10691 N. KENDALL DRIVE, #	310				ADDRESS	; [	
CITY-ST-ZIP	MIAMI FL 33176			6.4 (	HTY-S	T-ZIP		

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.